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Board Members Present: Trinka Kerr, Donna Sutton Fay, Lisa Maynes, Bram Kleppner, Kay Van Woert, Joan Lavoie, Rebecca Heintz, Amy Vaughan, Larry Goetschius, Jackie Majoros, Julie Tessler, Paul Bakeman, Clifton Long, Nate Waite, Dale Hackett, Sharon Henault (phone), and Michelle Fay.

Board Members Absent: Peter Espenshade, Vaughn Collins, Christina Colombe, Gladys Mooney, Sharon Winn, Laura Pelosi, Madeleine Mongan, Shannon Wilson, Cathy Davis and Tim Ford.

Other Interested Parties Present: Susan Gretkowski (phone), Ethan Latour, Brendan Hogan (phone), Kelly Barnier, and Betty Morse (phone).

Staff Present: DVHA: Jacqueline Rose, Dylan Frazer, Carrie Germaine and Clark Eaton.

HANDOUTS

- Agenda
- Medicaid & Exchange Advisory Board (MEAB) April 27, 2015 Meeting Minutes
- EPSDT Work Group Minutes (5/1/2015)
- Improving Access Work Group Minutes (5/4/2015)
- Individuals & Families Work Group Meeting Minutes (4/13/15)
- Qualified Health Plan (QHP) Stakeholder Work Group (5/19/15)
- Legislative Budget Initiatives for SFY 2016 (5/26/15)
- Vermont Health Connect (VHC) Update (5/26/15)
- VHC End-of-May Systems Update (5/26/15)
- MEAB Draft Work Group Operating Guidelines (5/19/15)
- MEAB Membership List (5/26/15)

CONVENE

Donna Sutton Fay and Bram Kleppner chaired the meeting.

Welcome/Introductions/Approval of Minutes

Board members and meeting attendees introduced themselves around the room. The meeting minutes for April 27, 2015 were reviewed and adopted.

MEAB Work Group Updates – Work Group Chairs

Early, Periodic Screening & Diagnostic Treatment (EPSDT) Work Group – Nate Waite, Department of Health, reviewed the May 1, 2015 meeting minutes and the group's recent activity. Following a brief update on the State Plan Amendment on licensure for Applied Behavior Analysis (ABA), the group discussed Developmental Evaluation and Treatment. There has been a federal update on the definition of habilitation services, but an issue remains on what conditions trigger "medical necessity" for habilitation services. For example, young children may experience developmental delays – they need services, but they do not yet have clinical diagnoses or conditions that establish eligibility for services. Early intervention may prevent developing long term conditions. Virginia has an effective Individual Family Service Plan (IFSP) that meets the clinical criteria for "medically necessary". For now, Vermont has broader criteria. The group then

^{*}all are posted to the VHC website

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had further discussion on state Medicaid planning for children. The EPSDT Work Group is scheduled to meet again on June 5th, at DVHA in Williston.

Improving Access Work Group - Provider Reimbursement Discussion - Trinka Kerr reported on the Work Group's May 4th meeting and gave a brief summary of agenda items that were covered. Due to time, not every agenda item was covered during the meeting. For Prior Authorization Notices of Decision (NODs), DVHA completed some revisions to make the NODs more consumer friendly, but not all of the Work Group's suggestions were accomplished because of resource constraints. Trinka also introduced that the Green Mountain Care Board was conducting a pilot program (working with DVHA, BCBSVT, and MVP) to determine the impact if certain services or drugs were exempt from Prior Authorizations. The bulk of the meeting focused on a discussion of ways to reduce paperwork and streamline processes for members with long term conditions who need Medicaid services. This was not a new topic and became a lengthy and difficult dialogue because, while DVHA felt they had taken some steps to streamline processes, Work Group members still felt DVHA needed to come up with some creative ideas to further reduce the burden on individuals and families (including their providers) who must continually interact with DVHA to request services. Action steps were assigned to Work Group members and DVHA to be completed prior to the next meeting. Peter McNichol provided a brief overview of the Medicaid Transportation Program, including higher costs that resulted from the expansion of the Medicaid program. The MEAB will request a briefing on Medicaid Transportation at a future board meeting. The next Improving Access Work Group meeting is scheduled for July 24, 2015. VHC Individuals and Families Work Group - Work Group Chair, Donna Sutton Fay reviewed the discussion topics from the May 11, 2015 meeting. Rebecca Heintz provided an update from BCBSVT on terminations and dunning notices for nonpayment of premiums. They are also processing retroactive terminations (about 5000 since January) based on direction from VHC. These actions were started in April, and BCBSVT and VHC will be reviewing the entire process in June. VHC also provided an update (with a handout) on progress toward an automated "change of circumstance". The technology is expected to be deployed by June 1. There was also a significant issue discussed on VHC not implementing the new 2015 Federal Poverty Level (FPL) in a timely manner; this could impact Medicaid eligibility determinations for individuals in 2015. VHC provided a follow-up O& A in response to this question and it has been provided to the MEAB as a handout. This will be discussed during today's VHC MEAB update. The next Individuals and Families Work Group meeting is scheduled for June 9, 2015 at DVHA in Williston.

Qualified Health Plan (QHP) Stakeholder Work Group — Trinka Kerr reported on the May 19, 2015 meeting held in Burlington. Minutes were available as a handout. This effort is directed toward the development of benchmark plans for QHP's in 2017; MEAB wanted to be included in this planning phase. The work group will also be involved in any changes that may be introduced (federally or by the state) concerning Essential Health Benefits. It was determined that the work group should continue as a designated MEAB work group to review stakeholder input, complete a set of recommendations for the MEAB by late summer, and input to DVHA's plan design presentation for the Green Mountain Care Board. Trinka invited other interested MEAB members to participate in the work group; the next meeting date is scheduled for 6/29/15. Provider Reimbursement Work Group — The Provider Reimbursement Work Group has not met in recent months, but Larry Goetschius expressed concern that although the initial state budget proposal for SFY 2016 included provisions for a Medicaid provider reimbursement rate increase,

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the budget passed out of the legislature is now essentially void of a Medicaid provider rate increase. Planning should commence soon for the next budget development cycle.

DVHA Updates/Discussion – Steven Costantino

Steven Costantino, DVHA Commissioner, distributed a summary handout listing the outcomes of legislative budget initiatives for Medicaid for SFY 2016: 1) maintaining Exchange cost-sharing subsidies – about \$761k was appropriated for these subsidies for individuals at the actuarial levels in effect on 1/1/15, 2) Blueprint For Health increases – approximately \$2.4 mil was appropriated to increase payments to patient-centered medical homes and community health teams (effective 7/1/15), 3) investing in primary care services – about \$1 mil was appropriated to increase reimbursement rates to PCP's beginning on 7/1/15 for services provided to Medicaid beneficiaries, 4) rate increases for other Medicaid providers served within AHS – a total amount of about \$834k, and 5) independent mental health and substance abuse treatment professionals – about \$111K was appropriated to DVHA for increasing Medicaid reimbursement rates (effective 7/1/15) for those professionals not affiliated with a designated agency who still provide services to Medicaid beneficiaries. There also was a reduction to VHC funding of approximately \$6.8 mil. Larry Goetschius reemphasized the importance of achieving a rate increase for providers. Donna Sutton Fay stressed the importance of getting the MEAB involved early in the budget development process in a meaningful, advisory role. Steven will welcome innovative ideas and input from the MEAB for the next budget cycle.

Vermont Health Connect (VHC) Update - Sean Sheehan/Jacqueline Rose

System Updates – Sean Sheehan, VHC Outreach Manager, reviewed the ongoing schedule and effort toward the delivery of two major system updates. The first update is "Release 1" and is scheduled for the end of May; it includes the functionality to support Changes of Circumstance, as well as Changes of Information. The cutover will occur near the end of this month, followed by some user validation testing when the system comes back up. The VHC informational web site will remain up during the cutover period. The customer support center will also remain open during daytime hours to assist with urgent medical coverage needs. The second update is "Release 2" and this must be completed by October to support functionality for Medicaid and QHP renewals, renewal notices, financial reconciliation & billing enhancements, and CMS enrollment integration.

Federal Poverty Limits and Eligibility – Jacqueline Rose, VHC Outreach and Education Manager, discussed the plan to implement the 2015 Federal Poverty Levels (FPLs) this summer; these were published near the end of January, 2015. VHC has not been able to implement the 2015 FPLs sooner. VHC is currently sizing the impact of this issue (number of customers affected) in order to determine next steps. MEAB members expressed concern about the delay in implementing the new FPL's and want to know what the legal authority is that would permit this delay; also, what, if necessary, will be done to make any retroactive corrections to adjust eligibility for affected members?

Lives Covered – Jacqueline summarized the current growth in lives covered by Qualified Health Plans and Medicaid and highlighted those that were new to VHC in 2015 to date. *Termination and Dunning Data* – These notices have been going out indicating 30, 60, and 90 days past due accounts. Through early May, there have been 405 non-subsidized cancellations, and 318 APTC cancellations.

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Renewals – As of 5/19/15, VHC is 95% complete with renewals. There are 395 renewals remaining to be processed, most of which are waiting on customer action.

Legacy Medicaid – An outreach pilot plan has been initiated to begin renewals for this group who were previously enrolled in Medicaid under the old system. At this point, about 30% of individuals outreached have applied. The pilot will run until the end of June and necessary next steps will be evaluated.

QHP 2016 Planning – The Green Mountain Care Board (GMCB) is reviewing 2016 proposed insurance rates for QHP's. BCBSVT and MVP have requested rate increases of 8.4% and 3.0% respectively. The GMCB has 90 days to review and act on the proposed rates. Public hearings have been scheduled (July 28 and 29), and a public comment period will be open through July 29. Call Center and Customer Service – There has been significant improvement this year when measuring missed calls, down to less than 2% this year. Average wait time on calls is also down significantly (wait times of about 40 seconds).

Assister Program – The RFP for the Assister program was released in mid-May for the next annual grant cycle starting on July 1, 2015. Assisters have done outstanding work and have completed more than 1.4 million unique outreach efforts with customers.

Data & Financial Reconciliation – Jacqueline reviewed the data & financial reconciliations efforts for both 2014 and 2015 and the steps being taken to fix mismatches, investigate root causes of issues, and fix problems.

Survey Update – The University of Massachusetts has assisted with a customer experience evaluation. The survey is on track with a greater than 30% response rate. A final presentation of the survey should be ready by the end of August.

Coverage to Care Booklet – VHC distributed a new booklet that describes access to health insurance. The booklet is also available online and is being mailed to libraries, health centers, and district field offices.

Members should contact Jacqueline Rose with any comments or suggestions on future VHC data/information presentations. Current VHC information and activities can always be viewed at www.vermonthealthconnect.gov

MEAB Discussion - Board Members

For the next meeting, the MEAB will prepare a draft resolution on the possible issue(s) created by VHC delaying the implementation of the 2015 FPL published guidelines.

Donna had prepared a new draft of the MEAB Work Group Operating Guidelines for review. Members provided some suggestions and inputs to the document; Donna will consolidate the inputs and bring a final draft of the guidelines to the June MEAB meeting.

The MEAB membership list was distributed, which includes terms of membership for some that will expire at the end of June. For those members, please let Clark Eaton know if you do not want to continue on the board.

There was discussion on the possibility of cancelling either the July or August MEAB meeting over the summer. Attendance was low during these months during 2014. The board felt that all meetings should still be scheduled over the summer; there are important issues that will need to be covered.

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Donna emphasized the importance of having a designated management representative from DVHA, as well as a representative from other key AHS Departments, attend the full MEAB meetings on a regular basis. The co-chairs will address this with DVHA for future meetings.

The co-chairs asked board members to consider and review potential agenda items (listed below) for the June 22 MEAB meeting.

Public Comment Opportunity – Co-Chairs

There was no public comment at the meeting.

Adjournment

The meeting was adjourned at 3:00PM.

Topics for Regular Update:

- Vermont Health Connect Topics/Discussion
- Commissioner Updates (Current Topics Discussion)
- Duals/VHIP/SIM Update/Discussion
- GC Waiver (as Necessary)
- Medicaid Shared Savings Program
- MEAB Work Group Meeting Reports
- Quarterly Advocate Report (Legal Aid)

Draft Topics for June 22 Meeting:

- DVHA SFY '16 Update/Discussion
- Chronic Care Initiative
- Delay in Using 2015 FPL's to determine Medicaid Eligibility
- Status of Medicaid Renewals

Future Meeting Topics:

- Health Care Reform all payer model
- Medicaid Transportation current and future budget
- Shared Savings/SIM update, including Learning Collaborative/Care Model
- Reinvestment in Community Based Services
- Affordability and reinvestment pertaining to provider rates
- Minimizing administrative complexity for businesses that offer insurance

Data Request(s) for Future Meeting:

Termination Data from Carriers

Total Medicaid Budget – what portion is entitlement/what is not?

Issue Tracker List:

- Inventory of Perverse Incentives
- Out-of-State travel
- Specialist or preferred providers

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- Mental Health fee schedule changes
- Prior Authorization concerns
- Coordination of Benefits between Medicare and Medicaid

Ongoing Small Group Works

- EPSDT Work Group
- Improving Access Work Group
- Small Employer Work Group
- Individuals and Families Work Group
- Provider Reimbursement Work Group

Next Meeting
June 22, 2015
Time: 11:00AM – 3:00PM

Site: DVHA, 312 Hurricane Ln, Williston, VT

Please visit the Advisory Board website for up-to-date information: http://info.healthconnect.vermont.gov/advisory_board/meeting_materials